

PERMIT ATTACHMENT F INSPECTION PLAN

Introduction

This section provides information on Rinchem Company, Inc.'s (**RCI**) Container Storage Facility (**the Facility**), as required by the New Mexico Hazardous Waste Management Regulations 20.4.1.500 NMAC, incorporating 40 CFR §264.15, and 20.4.1.900 NMAC, as incorporated at 40 CFR §270.14(b)(5).

Rinchem Company, Inc. personnel shall conduct regular inspections of all equipment and structures to prevent, detect, or respond to environmental or human health hazards. Inspection records shall be kept at RCI's administration building for three years from the date of the inspection. The inspections shall cover malfunctions, deteriorations, operator errors, and discharges that may cause or lead to a release of hazardous waste constituents to the environment or may pose a threat to human health.

The container storage Facility personnel shall receive general training concerning hazardous waste inspections as part of the RCI's hazardous waste training program. Personnel responsible for inspecting particular equipment or areas of the facility shall receive on-the-job training in inspection procedures. Inspection procedures shall be kept in the operating manual, which shall be located on-site in the office of the emergency coordinator.

RCI's, guards shall make daily rounds of the facility to detect any unauthorized entry to the Facility or any other abnormalities. The guards shall not use inspection checklists, but they shall notify the EC and/or emergency response personnel of any spills or other emergencies.

Inspection Schedule and Checklist

Permit Appendix F-1 contains "General Inspection Matrix Sheets" with schedule forms that shall be used at the Facility. These Inspection Sheets include logs for the regular 5 day work week, quarterly, semi-annual and annual schedules, ensuring that inspections occur at appropriate frequencies. The items to be inspected shall be placed on the schedule that is appropriate for the frequency of inspection to be performed. There is a section on each form for recording the name of the inspector, the date of the inspection, the nature of repairs performed and/or remedial action taken, with comments. The schedules shall be maintained and kept at the Facility.

Inspection Schedules

The following pages 3 of fourteen through 14 of 14 contain the General Inspection Schedule Forms that shall be used at the Facility. These are forms for the regular 7 day work week, quarterly, semiannual and annual schedules. The criteria to be inspected are placed on the schedule that is appropriate for the frequency of inspection to be performed. There is a section on each form for recording the date and nature of repairs performed and/or remedial action taken. The schedules shall be maintained and kept at the RCI office.

APPENDIX F-1: Rinchem's General Inspection Matrix Sheets

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[THESE MATRIX SHEETS SHALL BE FILLED OUT IN INK]

Inspector _____ Date of Inspection _____ Time of Inspection _____

Inspector Signature _____

ITEM	CRITERIA/OBSERVATIONS	STATUS	DATE AND NATURE OF REPAIRS/
			(A) Acceptable
	REMEDIAL ACTION AND COMMENTS		(U) Unacceptable

Container Loading/ - Check that no containers of hazardous waste
Unloading Shall be shall be left open or exposed overnight _____

- Check for evidence of spilled material on _____

concrete below truck and on dock

- Check for debris and refuse _____

Container Storage - Check for evidence of spilled material on _____

Shall be - concrete floor & drains _____

- Check for debris and refuse _____

- Check for adequacy of aisle space _____

Rinchem Daily Inspection Sheet [FILL OUT IN INK]

Inspector _____ Date of Inspection _____ Time of Inspection _____

Inspector Signature _____

ITEM	CRITERIA/OBSERVATIONS	STATUS	DATE AND NATURE OF REPAIRS/
	REMEDIAL ACTION AND COMMENTS		(A) Acceptable
			(U) Unacceptable

Stored Containers - Check for container leaks or swelling _____

- Check that containers shall be not open _____

- Check for proper placement _____

Security Equipment

- Check that alarm is working _____

- Check that gates close properly and locks _____

shall be in working order

Rinchem Daily Inspection Sheet [FILL OUT IN INK]

Inspector _____ Date of Inspection _____ Time of Inspection _____

Inspector Signature _____

ITEM	CRITERIA/OBSERVATIONS	STATUS	DATE AND NATURE OF REPAIRS/ (A) Acceptable
	REMEDIAL ACTION AND COMMENTS		(U) Unacceptable

Communication Equipment

Telephones - Check that access is not blocked _____

Pull Stations - Check that access is not blocked _____

Emergency Equipment

Fire Extinguishers - Check that access is not blocked _____

EyeWash/Showers - Check that access is not blocked _____

Exits - Check that access is not blocked _____

Rinchem Daily Inspection Sheet [FILL OUT IN INK]

Inspector _____ Date of Inspection _____ Time of Inspection _____

Inspector Signature _____

ITEM	CRITERIA/OBSERVATIONS	STATUS	DATE AND NATURE OF REPAIRS/ (A) Acceptable
	REMEDIAL ACTION AND COMMENTS		(U) Unacceptable

Safety Equipment

Emergency Shower/ - Check water pressure _____

Eyewash _____
- Check for leaks _____

I certify that the above recommended action has been taken on items mentioned and/or defective items shall be now satisfactory.

Supervisor _____ Date _____

Rinchem Quarterly Inspection Sheet [FILL OUT IN INK]

Inspector _____ Date of Inspection _____ Time of Inspection _____

Inspector Signature _____

ITEM	CRITERIA/OBSERVATIONS	STATUS	DATE AND NATURE OF REPAIRS/
	REMEDIAL ACTION AND COMMENTS		(A) Acceptable
			(U) Unacceptable

Safety Equipment

Protective glasses - Check if broken _____

_____ - Check for adequate supply for _____
employees & visitors

Hard Hats - Check if broken _____

_____ - Check for adequate supply for _____
employees & visitors

First Aid Equipment - Check that all necessary items shall be _____
and Kit _____ present _____

Rinchem Quarterly Inspection Sheet [FILL OUT IN INK]

Inspector _____ Date of Inspection _____ Time of Inspection _____

Inspector Signature _____

ITEM	CRITERIA/OBSERVATIONS	STATUS	DATE AND NATURE OF REPAIRS/
	REMEDIAL ACTION AND COMMENTS		(A) Acceptable
			(U) Unacceptable

Protective Clothing - Check clothes for holes, wear and tear _____

- Check for adequate number of sets of _____

protective clothing

Respirator - Check for adequate number of _____

cartridges for respirators

- Check that all respirators shall be in good _____

working condition

Rinchem Quarterly Inspection Sheet [FILL OUT IN INK]

Inspector _____ Date of Inspection _____ Time of Inspection _____

Inspector Signature _____

ITEM	CRITERIA/OBSERVATIONS	STATUS	DATE AND NATURE OF REPAIRS/ (A) Acceptable
	REMEDIAL ACTION AND COMMENTS		(U) Unacceptable

Container Loading/ - Check dock leveler for proper

Unloading Shall be adjustment, operation and corrosion

- Check for condition and availability of _____
_____ over pack and open head drums

Security Equipment

Gates - Check for damage or corrosion _____

Facility Fence - Check for corrosion _____

- Check fence for broken wire _____

Rinchem Quarterly Inspection Sheet [FILL OUT IN INK]

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Inspector _____ Date of Inspection _____ Time of Inspection _____

Inspector Signature _____

ITEM	CRITERIA/OBSERVATIONS	STATUS	DATE AND NATURE OF REPAIRS/ (A) Acceptable (U) Unacceptable
	REMEDIAL ACTION AND COMMENTS		

Signs - Check that signs shall be present (English _____
 _____ and Spanish)

Check that signs shall be legible (not _____
 _____ defective, readable at 25 feet)

Lighting - Check to see all lights work (no _____
 _____ defective bulbs or bad connections)

Emergency Equipment

Fire Extinguishers - Check pressure gauge for full charge _____
 _____ indication

Rinchem Quarterly Inspection Sheet [FILL OUT IN INK]

Inspector _____ Date of Inspection _____ Time of Inspection _____

Inspector Signature _____

ITEM	CRITERIA/OBSERVATIONS	STATUS	DATE AND NATURE OF REPAIRS/ (A) Acceptable
	REMEDIAL ACTION AND COMMENTS		(U) Unacceptable

Emergency Equipment

- Check inspection tag to ensure that _____
monthly inspections by outside service
shall be current

- Check seal to ensure no one has used _____
extinguisher

Absorbents - Check for accessibility _____

- Check for adequate supply _____

Self-Contained - Check if tanks shall be charged _____

Breathing Apparatus - Check if leaks in tanks are present _____

Rinchem Quarterly Inspection Sheet [FILL OUT IN INK]

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Inspector _____ Date of Inspection _____ Time of Inspection _____

Inspector Signature _____

ITEM	CRITERIA/OBSERVATIONS	STATUS	DATE AND NATURE OF REPAIRS/
	REMEDIAL ACTION AND COMMENTS		(A) Acceptable
			(U) Unacceptable

- Check to see if supplied air respirators _____

_____ shall be being inspected monthly

Spill Cart - Check if all necessary items shall be _____

_____ present in accordance with the
inventory checklist

I certify that the above recommended action has been taken on items mentioned and/or defective items shall be now satisfactory.

Supervisor _____ Date _____

Rinchem Semiannual Inspection Sheet [FILL OUT IN INK]

Inspector _____ Date of Inspection _____ Time of Inspection _____

Inspector Signature _____

ITEM AND NATURE OF REPAIRS/ REMEDIAL ACTION AND COMMENTS	CRITERIA/OBSERVATIONS	STATUS (A) (U) Unacceptable	DATE Acceptable
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<u>Forklift</u>	- Check logbook to see if complete	_____
_____	safety checkup done by outside service company is complete	_____

<u>Ground Water -</u>	Sample and analyze the ground water	_____
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<u>Monitoring System</u>	for the following data: total dissolved solids, pH, and total organic carbon	_____
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<u>Spill Collection</u>	- Check for presence of material in tank	_____
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<u>Tank</u>	- Check soundness of tank	_____
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I certify that the above recommended action has been taken on items mentioned and/or defective items shall be now satisfactory.

Supervisor _____ Date _____

Rinchem Annual Inspection Sheet [FILL OUT IN INK]

Inspector _____ Date of Inspection _____ Time of Inspection _____

Inspector Signature _____

ITEM	CRITERIA/OBSERVATIONS	STATUS	DATE AND NATURE OF REPAIRS/
	REMEDIAL ACTION AND COMMENTS		(A) Acceptable
			(U) Unacceptable

<u>Overhead Door</u>	- Check logbook to see if complete	_____
	safety checkup done by outside service company is complete	

<u>Fire Suppression</u>	- Check logbook to see if complete	_____

<u>System</u>	safety checkup done by outside service company is complete

I certify that the above recommended action has been taken on items mentioned and/or defective items shall be now satisfactory.

Supervisor _____ Date _____